

## STATEMENT OF INTERESTS

INSTRUCTIONS: This form must be used to report all Interests required to be disclosed under the Conflict of Interest Disclosure Act (T.C.A. §8-50-501, et seq.) Disclosure statements must be filed annually by January 31 by officeholders, no later than thirty (30) days following the qualifying deadline for candidates and within thirty (30) days from the date of appointment for appointees. Amended disclosure must be filed whenever reported conditions change because of the termination or acquisition of interests for which disclosure is required.

Individuals holding or seeking state offices specified in T.C.A. §8-50-501 must file their disclosure statements with the Registry of Election Finance, 404 James Robertson Parkway, Suite 1614, Nashville, TN 37243-1360 (phone 615-741-7959). Individuals holding or seeking elected city or county office must file their reports with the county election commission.

Officeholders may complete items 1- 4 and skip to Item 14 if there has been no change in condition since the previous report. The disclosure statement must be signed and the signature attested to by a witness in item 15. Attach additional pages as necessary. Please type or print all information in black ink.

A DATE OF DIGOLOGUES	a will of officer of comparing
1. DATE OF DISCLOSURE	2. NAME OF OFFICIAL OR CANDIDATE
1-28-04	MARK G. ROTHBERGER
2 ADDDESS AND DUONE	
3. ADDRESS AND PHONE	Street or Rural Route City State Zip code Phone
15 Shoal Creek Fa	11s Signal Mountain, TN, 37377 (42) 886-5623
A TITLE OF OFFICE HELD OF	SOUGHT (Include district number , if applicable)
Municipal Judge,	Town of Signal Mountain
5. SOURCES OF INCOME: Lis minor children residing with you. salaried employments. No dollar	
business organization in excess of	estment by you, your spouse or minor children residing with you in any corporation or other of ten thousand dollars (\$10,000) or five percent (5%) of the total capital. The name of the be listed but no dollar amounts or percentages of the investment need to be stated.
spouse or minor children residing	i, firm or organization for whom compensated lobbying is done by any associate, your with you. Also, list any firm in which you, your spouse or minor children residing with you ensated lobbying is done. Explain the terms of any such employment and the measures
PROFESSIONAL SERVICES: services, such as those of an atternation	: List in general terms (by areas of the client's interests) the entities to which professional orney, accountant or architect, are furnished by you or your spouse.
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<ol> <li>LEGISLATIVE EXPENSES (For members of General Assembly only): List the amount and source (by name) of any contributions from private sources for use in defraying the expenses necessarily related to the adequate performance of your legislative duties.</li> </ol>		
	live from any person, firm or organization who is in the practice of fluence directly or indirectly, the passage or defeat of any legislaslative committees or the members thereof.	
BANKRUPTCY: List any adjudication of bankrup five (5) years of the date of this report.	tcy or discharge received in any United States district court within	
10. LOANS, List any loan or combination of lanns to	r more than one thousand dollars (\$1,000) from the same source	
made in the previous calendar year to you, your spouclosed on this report if they are:  (1) From your immediate family (spouse, parent, si (2) From a federally insured financial institution or no business of making loans. The loan must bear assures repayment, evidenced by a written institution of the control of the cont	bling, or child); nade in accordance with existing law in the ordinary course of doing the usual and customary rate of interest, be made on a basis which trument and subject to a due date or amortization schedule. eral, bearing the usual and customary interest rate of the lender and evidenced by a written instrument and subject to a due date and en percent (10%) partnership interest. eent (50%) of the outstanding voting shares are owned by you or by	
13. ADDITIONAL INFORMATION: List any additional	I information you wish to disclose.	
14. OPTION AVAILABLE TO OFFICEHOLDERS ONL		
There has been no change in conditions s		
15. TO BE SIGNED BY REPORTING OFFICIAL OR	CANDIDATE (must be attested to by witness)	
is tru that Act.	tify that the information contained in this disclosure statement use and that it is a complete and accurate report of all matters I am required to disclose by the Conflict of Interest Disclosure    The second contained of Candidate   Date   Date	
	e undersigned, do hereby witness the above signature which signed in my presence.	
3	Signature of Witness Date	